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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/584,833			ing Date 27/2006	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR			NUMBER FI	LED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A]	N/A	
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A		N/A			N/A	
EXAMINATION FEE (37 CFR 1 16(o), (p), or (q))			N/A		N/A		N/A			N/A	
TOTAL CLAIMS (37 CFR 1 16(i))			minus 20 = *			l	x \$ =		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 = *			1	X \$ = 3		1	X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sh	eets of pap \$250 (\$125 ditional 50	gs exceed 100 on size fee due for each n thereof. See CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1		
* If the difference in column 1 is less than zero, enter "0" in column 2.						•	TOTAL]	TOTAL	
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SM										ER THAN ALL ENTITY	
AMENDMENT	02/14/2011	CLAIMS REMAINING AFTER AMENDMEN	т	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	* 5	Minus	** 20	= 0]	x s =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 4	Minus	5	= 0]	x s =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,15(i))		Minus]	× \$ =		OR	x s =	
Δ	Independent (37 CFR 1 16(h))	*	Minus	***	-]	X \$ =		OR	X \$ =	
핍	Application Size Fee (37 CFR 1.16(s))					1			1		
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	
*If the entry in column 1 is less than the entry in column 2, water 0° in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" in YHIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" in YHIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" in YHIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" in YHIS SPACE is less than 3, enter "3". The Highest Number Previously Paid For" in YHIS SPACE is less than 3, enter "3". The Highest Number Previously Paid For" in YHIS SPACE is less than 3, enter "3".											

This collection of information is required by 37 GPR 11.6. The information is required to obtain or retain a benefit by the public at Printing to 16 (and by the 1921 A) process) an application Confidentially 37 GPR 11.6. This information is required to obtain or retain a benefit by the public at Printing to 16 (and by the 1921 A) process) and public of the completed application from the turb (S. 12 and 37 GPR). The well way depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suppleation for medical pictured in the public pictured i